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OFFICE OF PETITIONS

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**FAX FILING IN U.S. PATENT & TRADEMARK OFFICE**

DATE: December 23, 2010

TIME:

|  |   |                   |                   |
|--|---|-------------------|-------------------|
| TO:  | USPTO   | FAX NO.:          | (571) 273-0025    |
| FROM:  | Lawrence E. Ashery                                    | ADMIN. ASST.:     | Donna M. Wellings |
| APPLN. NO.:  | 10/552,396  | ATTY. DOCKET NO.: | MAT-8725US        |
| TITLE OF APPLN.:   | FANNING METHOD AND FAN DEVICE OF PLASMA DISPLAY PANEL |                   |                   |
| FILING DATE:   | October 7, 2005                                       | ART UNIT:         | 2889              |
| FIRST INVENTOR:  | Koji AKIYAMA, et al.                                  | CONF. NO.:        | 4763              |
| TITLE OF DOCUMENT (and List of Attachments): Appeal Brief, Transmittal Form, Fee Transmittal and Form 2038 |   |                   |                   |

Total Number of Pages: 30 (including this form)

**COMMENTS**
**CONFIDENTIAL AND PRIVILEGED ATTORNEY/CLIENT INFORMATION**

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PTO/SB/21 (09/2008)

Approved for use through 10/31/2008. OMB 0651-0031

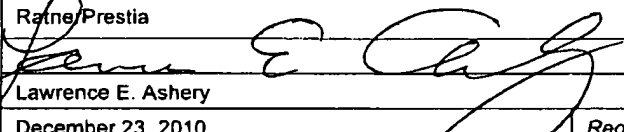
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|  |                      |                     |                     |
|--|----------------------|---------------------|---------------------|
| <b>TRANSMITTAL FORM</b><br><i>(to be used for all correspondence after initial filing)</i> | Application Number   | 10/552,386          | <b>FAX RECEIVED</b> |
|  | Filing Date          | October 7, 2005     |                     |
|  | First Named Inventor | Koji Akiyama et al. | <b>DEC 23 2010</b>  |
|  | Art Unit             | 2889                |                     |
|  | Examiner Name        | Britt D. Hanley     |                     |
| Attorney Docket No.  | MAT-8725US           |                     |                     |
| Total Number of Pages in This Submission   |                      |                     |                     |

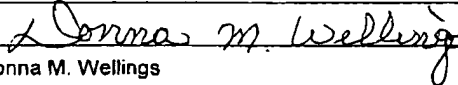
| ENCLOSURES (Check all that apply)   |  |   |
|---|--|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><br><input type="checkbox"/> Amendment/Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/Declaration(s)<br><br><input type="checkbox"/> Extension of Time Request<br><br><input type="checkbox"/> Express Abandonment Request<br><br><input type="checkbox"/> Information Disclosure Statement<br><br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><br><input type="checkbox"/> Response to Missing Parts/<br>Incomplete Application<br><input type="checkbox"/> Response to Missing Parts<br>under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a<br>Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation,<br>Change of Correspondence<br>Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____<br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication<br>to TC<br><input type="checkbox"/> Appeal Communication to Board<br>of Appeals and Interferences<br><input checked="" type="checkbox"/> Appeal Communication to TC<br>(Appeal Notice, Brief, Reply<br>Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br>Other Enclosure(s) (please<br>identify below): |
| <b>Remarks:</b>   |  |   |

## SIGNATURE OF APPLICANT, ATTORNEY OR AGENT

|              |   |                  |        |
|--------------|---|------------------|--------|
| Firm Name    | Ratne/Prestia   |                  |        |
| Signature    |  |                  |        |
| Printed Name | Lawrence E. Ashery  |                  |        |
| Date         | December 23, 2010   | Registration No. | 34,515 |

## CERTIFICATE OF TRANSMISSION / MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

|                       |   |      |                   |
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| Signature             |  |      |                   |
| Typed or Printed Name | Donna M. Wellings   | Date | December 23, 2010 |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Office, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, ALEXANDRIA, VA 22313-1450.

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PTO/SB/17 (10/07)

Approved for use through 6/30/2010. OMB 0851-0032  
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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Effective on 12/08/04.  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).**FEE TRANSMITTAL  
For FY 2008**☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ ) 540.

**Complete if Known**

|                      |                     |
|----------------------|---------------------|
| Application Number   | 10/552,396          |
| Filing Date          | December 23, 2010   |
| First Named Inventor | Koji Akiyama et al. |
| Examiner Name        | Britt D. Hanley     |
| Art Unit             | 2889                |
| Attorney Docket No.  | MAT-8725US          |

**FAX RECEIVED****DEC 23 2010****OFFICE OF PETITIONS****METHOD OF PAYMENT** (check all that apply)☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_☒ Deposit Account Deposit Account Number: 18-0350 Deposit Account Name: RatnerPrestia

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee  
☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

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**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| Application Type | FILING FEES |                       | SEARCH FEES |                       | EXAMINATION FEES |                       | Fees Paid (\$) |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
|                  | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)         | Small Entity Fee (\$) |                |
| Utility          | 330         | 165                   | 540         | 270                   | 220              | 110                   | _____          |
| Design           | 220         | 110                   | 100         | 50                    | 140              | 70                    | _____          |
| Plant            | 220         | 110                   | 330         | 165                   | 170              | 85                    | _____          |
| Reissue          | 330         | 165                   | 540         | 270                   | 650              | 325                   | _____          |
| Provisional      | 220         | 110                   | 0           | 0                     | 0                | 0                     | _____          |

**2. EXCESS CLAIM FEES****Fee Description**

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

| Small Entity |          |
|--------------|----------|
| Fee (\$)     | Fee (\$) |
| 52           | 26       |
| 220          | 110      |
| 390          | 195      |

| Total Claims  | Extra Claims | Fee (\$) | Fee Paid (\$) | Multiple Dependent Claims | Fee (\$) | Fee Paid (\$) |
|---|--------------|----------|---------------|---------------------------|----------|---------------|
| - 20 or HP =  | x            | =        |               |                           |          |               |
| HP = highest number of total claims paid for, if greater than 20      |              |          |               |                           |          |               |
| Indep. Claims   | Extra Claims | Fee (\$) | Fee Paid (\$) |                           |          |               |
| - 3 or HP =   | x            | =        |               |                           |          |               |
| HP = highest number of independent claims paid for, if greater than 3 |              |          |               |                           |          |               |

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) |
|--------------|--------------|--|----------|---------------|
| - 100 =      | / 50 =       | (round up to a whole number) x                   | =        |               |

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): \_\_\_\_\_

**Fees Paid (\$)****SUBMITTED BY****Complete (if applicable)**

|                   |                                 |        |           |                   |
|-------------------|---------------------------------|--------|-----------|-------------------|
| Signature         | Registration No. Attorney/Agent | 34,515 | Telephone | 610.407-0700      |
| Name (Print/Type) | Lawrence E. Ashery              |        | Date      | December 23, 2010 |

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